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PTO/SB/21 (09-06) Approved for use through 03/31/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/713,729 Filing Date TRANSMITTAL November 13, 2003 First Named Inventor **FORM** Bruce W. MCGAUGHY Art Unit 2128 Examiner Name D. Silver (to be used for all correspondence after initial filing) Attorney Docket Number 29 pages Total Number of Pages in This Submission 188122001700 & 2 Refs. ENCLOSURES (Check all that apply) After Allowance Communication Fee Transmittal Form + duplicate Drawing(s) copy for fee processing (2 pages) Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC x Amendment/Reply (20 pages) Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information Provisional Application Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please Extension of Time Request - One X Terminal Disclaimer Identify below): Month (1 page) PTO Form SB-08 + copy of form (2 Express Abandonment Request Request for Refund pages) 2 References Information Disclosure Statement -CD, Number of CD(s) Return Receipt Postcard Supplemental (3 pages)

Reply to Missing Parts under 37 CFR 1.52 or 1.53

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name MORRISON & FOERSTER LLP (Customer No. 25226)

Signature Thomas Chan

Date January 25, 2007

Reg. No. 51,543

Landscape Table on CD

Remarks

I hereby certify that this paper is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 377983431 US, on the date shown below in an envelope addressed to:								
MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.								
Dated: January 25, 2007	Signature:	(Lori Sims)						

Certified Copy of Priority

Reply to Missing Parts/

Incomplete Application

Document(s)



JAN 25 2007

PTO/SB/17 (07-06)
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Under the Paperwork Reduction Act of 1995, no person are required to			red to rest	respond to a collection of information unless it displays a valid OMB control number Complete if Known							
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		818). A	pplication Num								
FEE TRANSMITTAL			-	iling Date	November 13,	713,729 ember 13, 2003					
			_			Bruce W. MCGAUGHY					
For FY 2006			_			. Silver					
Applicant claims small entity status. See 37 CFR 1.27			A	Art Unit 21		128					
TOTAL AMOUNT	TOTAL AMOUNT OF PAYMENT (\$) 300.00			ttomey Docket	No.	188122001700					
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP											
A specific description of the second											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below. Charge fee(s) indicated below, except for the filing fee											
x Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULATION											
1. BASIC FILING, S	SEARCH, AND EXAM			0115550	EVALUE.	IATION FEED					
		G FEES Small Entity	SEAR	CH FEES Small Entity	EXAMI	NATION FEES Small Entity					
Application Type	Fee (\$)		ee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)				
Utility	300	150	500	250	200	100	0.00				
Design	200	100	100	50	130	65	0.00				
Plant	200	100	300	150	160	80	0.00				
Reissue	300	150	500	250	600	300	0.0	0.00			
Provisional	200	100	0	0	0	0	0.0	0			
2. EXCESS CLAIM	FEES							mall Entity			
Fee Description	// 1 !! B! \						Fee (\$)	Fee (\$)			
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)							50 200	25 100			
Multiple dependent	•	g Keissues)					360	180			
1 ' '		oo (\$)	Eoo Dai	id (\$)	M	ultiple Depende		100			
			Fee Pai		Fee (\$)			Fee Paid (\$)			
	of total claims paid for, if gr		0.0	<u> </u>		50.00	0.00				
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)											
1000000000000000000000000000000000000											
HP = highest number of independent claims paid for, if greater than 3.											
3. APPLICATION S											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)											
- 100 = /50 (round up to a whole number). x 250.00							= 0.00				
4. OTHER FEE(S)											
Non-English Sp	ecification, \$130 fee						400				
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00 1806 Submission of an Information Disclosure Statement 180.00											
SUBMITTED BY											
Signature	070			egistration No.	51,543	Telephone	(650) 813-	-5616			
	homas Chan			attomey/Agent)		Date	January 25				
rame (Fille type)	nomas onail					53.0	Junuary 20	, 2007			